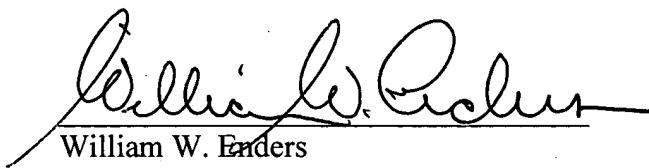


REMARKS

Attached is a check in the amount of \$573.00, for 35 extra dependent claims and 6 extra independent claims. Should any fees under 37 CFR 1.16-1.21 be required for any reason relating to the enclosed materials, the Commissioner is authorized to deduct such fees from Deposit Account No. 10-1205/COVI:005. The examiner is invited to contact the undersigned at the phone number indicated below with any questions or comments, or to otherwise facilitate expeditious and compact prosecution of the application.

Respectfully submitted,

A handwritten signature in black ink, appearing to read "William W. Enders", written over a horizontal line.

William W. Enders  
Registration No. 41,735  
Attorney for Applicant

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